U. S. Immigration and Customs Enforcement (ICE) subjects hundreds of immigrants detained in a privately run ICE jail in central Louisiana to an egregious pattern of abuse, including widespread exposure to COVID-19 and the systemic misuse of punitive solitary confinement. Pine Prairie ICE Processing Center (“Pine Prairie”) is an immigration detention center in central Louisiana with the capacity to jail over 1,000 people. The facility is operated by a private prison company, the GEO Group, Inc. The findings reported in this white paper are based on interviews conducted between February and May of 2021 with immigrants formerly and currently detained at Pine Prairie. These interviews reveal a disturbing trend in which ICE officers and personnel at Pine Prairie use punitive solitary confinement to segregate individuals who have contracted COVID-19 or have experienced other medical or mental health crises, such as contracting mumps from unsanitary conditions or suffering from depression and anxiety. Pine Prairie has also deployed solitary confinement to silence protesters, including those advocating for racial justice. This pattern of implementing punitive solitary confinement is abusive and unlawful, and in some cases it may constitute torture.
THE EXPLOSION OF IMMIGRANT INCARCERATION IN THE RURAL SOUTH

The current U.S. immigration system has only taken shape in the last 25 years. This growth was fueled by the creation of new criminal justice and immigration laws in 1990s—the same policies now recognized as having led to the mass incarceration of Black people. According to government officials, immigrants intercepted by ICE are placed in detention centers for the purpose of ensuring that they appear at removal and deportation proceedings. The process is supposedly designed to ensure the effective functioning of these proceedings, not to punish detained immigrants. Yet ICE continues to operate its network of over 200 jails with notoriously abusive conditions. ICE uses these facilities to lock up immigrants, including individuals who arrive at borders and request legal relief, such as asylum; longtime community members who are facing removal because of allegations of criminal conduct; and undocumented people, including those who were brought to the U.S. as infants.

Since 2017, ICE has concentrated the growth of its jail network in places where immigrants are isolated from their families and communities, less likely to be able to access legal counsel, have a higher chance of remaining in detention without real opportunity for release, and are more likely to lose their cases. These new detention centers demonstrate patterns of egregious mistreatment and abuse, including medical and mental health care neglect, that have worsened as the system has expanded. Despite the COVID-19 pandemic, during which the Centers for Disease Control and Prevention (CDC) and international human rights bodies alike have urged the immediate release of as many individuals in detention as possible, today ICE is still jailing over 25,000 immigrants.

IN THE LAST THREE YEARS, LOUISIANA HAS OPENED EIGHT NEW DETENTION CENTERS. LOUISIANA NOW LOCKS UP THE SECOND LARGEST POPULATION OF IMMIGRANTS IN ICE DETENTION, BEHIND ONLY TEXAS.

Louisiana in particular has become a hub for immigrant detention. It is often referred to by immigrants as a “place of no return.” In the last three years, Louisiana has opened eight new detention centers. Louisiana now locks up the second largest population of immigrants in ICE detention, behind only Texas. Pine Prairie, part of this network of ICE jails, is 100 miles from the nearest metro area; at Pine Prairie, there are 45 detained people per every one immigration attorney within a 100-mile radius.
PINE PRAIRIE’S CONDITIONS ARE NOT FIT FOR HUMANS

Pine Prairie used to be a prison, and the conditions in the facility reflect that history. Immigrants detained there have reported the incredibly disturbing ways the facility denies them basic human rights and dignity. The inhumane living conditions at Pine Prairie—which predate but have been exacerbated by the COVID-19 pandemic—violate ICE’s own policies.

INFESTATION
Multiple people said their cells and amenities, including the showers, are infested with ants and other bugs. Some immigrants described black mold and mildew in the showers. Others reported multiple instances of toilet paper shortages in the facility. One man stated: “You can ask for toilet paper and they will only give you one roll. One roll goes by so fast, it’s gone after three times and then you have to ask again. They run out constantly.” At one point, no one in the facility had toilet paper for three days.

EXPIRATION
The food is often of poor quality and expired. On one occasion, detained immigrants who worked as kitchen staff discovered that the bread ICE instructed them to serve was past the marked expiration date and visibly moldy. Multiple people reported that “the food is always served cold” and “tastes expired.” One individual noted that “the milk is usually sour and many times the labels say that it is expired.” Nearly everyone we interviewed reported that the milk they are given at mealtimes repeatedly has been marked as expired. “I do remember distinctly the milk because you can see the expiration date on the label, and most of the time the milk is expired at Pine Prairie,” said one person. “The food here is the worst. I’ve never had anything so horrible in my life. I’ve never had food this bad.”

STARVATION
Immigrants on the quarantine floor report that food is delivered at “times that make it impossible to eat.” Breakfast is typically served at 4 a.m., when most people are asleep, lunch is served at 11 a.m., and dinner is served at 3 p.m. The length of time between dinner and bedtime has resulted in several immigrants reportedly undereating and finding themselves malnourished, experiencing frequent migraines, blurred vision, and crippling fatigue. One immigrant stated: “In segregation they feed you a lot less.”

CONTAMINATION
Multiple immigrants described the water in their cells as not potable: “It comes out white and smells funny. It looks contaminated, so I don’t drink it.” One individual mentioned that the water from the combination sink-toilet fixture “tasted kind of funny, not really like water. Sometimes it comes out yellow, but you have no other choice but to drink it, that’s all the water you got.” The lack of consistent access to safe food and drinking water at Pine Prairie violates ICE’s own requirements, including the standards that “food service personnel shall provide nutritious and appetizing meals” and the notion that “food shall never be used for punishment.”
COVID-19 HAS RUN RAMPANT THROUGH PINE PRAIRIE

The pattern of lack of medical care and unsanitary conditions at Pine Prairie has been exacerbated by the COVID-19 pandemic. During interviews, immigrants detained at Pine Prairie reported not being able to socially distance, not having proper personal protective equipment (PPE), and living in extreme fear of contracting COVID-19 and dying in the facility. These accounts indicate that in addition to violating ICE’s own standards, Pine Prairie also violated the CDC’s COVID-19 guidelines for correctional facility operations, hygiene protocol, and prevention practices.

SANITATION PRACTICES AND PERSONAL PROTECTIVE EQUIPMENT (PPE)

At Pine Prairie, individuals must sanitize their own units and have limited or no access to hand soap or sanitizer. While detained immigrants are expected to clean their shared living areas themselves, including bathrooms, showers, and sink-toilet fixtures, they are not provided with PPE for cleaning. Immigrants reported only being provided with the meager disposable masks they are issued for everyday use. They are routinely not provided gloves, and sometimes they are not even given cleaner or disinfectant. A currently detained individual told us that he has to repeatedly ask guards for cleaning supplies and hand sanitizer, and his requests are often denied. He notes that it “depends on the mood of the officer” and that hand sanitizer and soap are unaffordable from the commissary.

Another individual noted that for the 14 months he was detained at Pine Prairie during the COVID-19 pandemic, he received no hand sanitizer or soap. Money is so scarce that immigrants typically use whatever they have to buy food items from the commissary and are often forced to use shampoo to clean their hands. Until late April 2020, Pine Prairie did not provide detained people with any masks. Several immigrants reported that they only have access to “flimsy” single-use paper masks that are often distributed only once a week. Mask-wearing is not enforced at Pine Prairie, for either detained people or facility staff. Further, as the CDC loosens mask guidelines for vaccinated individuals, those detained in Pine Prairie—who are themselves isolated from receiving the vaccine—will be at even greater risk of contracting COVID-19 from Pine Prairie personnel.
COHorting’ AND SOCIAL DISTANCING PRACTICES

Social distancing is not possible at Pine Prairie. Individuals report being housed in close quarters and forced to sleep two to three feet from each other in bunk beds bolted to the floor. Detained individuals use common spaces together, sharing tables, telephones, sink-toilets, and showers. Large groups share eating areas, including groups of up to nearly 100 people. Immigrants reported being required to sit close together, approximately two feet apart, at mealtimes and they said dining areas are not disinfected after each sitting. If people try to socially distance by sitting a few feet apart, the guards force them to return to sit in the group. In addition, at least two detained migrants working as food servers at Pine Prairie tested positive for COVID-19. Another immigrant reported that at Pine Prairie, “social distancing is impossible” and that “people are forced to stay in their cells if they want to limit their contact with other people.” Multiple immigrants reported that recreational and outdoor time are not staggered at Pine Prairie, meaning that those who wish to abide by the CDC’s social distancing guidelines are forced to forgo outdoor time. “[Pine Prairie personnel] say keep your distance, but we are 70 people in one bunker,” one immigrant said. “You can’t even walk around without bumping into another person.”

Pine Prairie has disregarded cohorting requirements, which require that people who are quarantined or in medical isolation should be housed in single cells or as a cohort with six feet of personal space available to individuals in all directions. After a fellow kitchen worker tested positive for COVID-19, one immigrant reported that his pod of eight was placed in a 24/7 lockdown with no access to amenities or any recreational time for 15 days. They were not given masks or hand sanitizer for over two weeks, yet were forced to share one sink-toilet and eat all of their meals together in a very small space. He said, “When I was lying in bed, if I reached my arm out, I would be touching my fellow detainee.” An immigrant detained in the medical quarantine floor at Pine Prairie stated that his cell originally had eight people. Only after five weeks of repeatedly complaining about the inability to socially distance was the number reduced to three people. Other pods have made similar complaints, but Pine Prairie has continued the practice of placing at least eight people per cell in the medical quarantine unit.

As one immigrant explained, “People are terrified to report their COVID-19 symptoms, especially those who do not speak English well, because they know they will end up in solitary.”

Further, ICE standards require facilities to have plans to address the management of infectious and communicable diseases that include “control, treatment and prevention strategies.” Pine Prairie has not publicly released such a plan. People are frequently transferred to, from, and between facilities in violation of both ICE and CDC guidelines. Where possible, ICE facilities “must restrict transfers of detained non-ICE populations and facilities.” The first case of COVID-19 at Pine Prairie occurred after ICE accepted a COVID-19 positive individual who was transferred from the Bureau of Prisons’ Oakdale, La., facility, which was dealing with a COVID-19 outbreak at the time. Coupled with a disregard for required cohorting and social distancing requirements, ICE’s practice of recklessly transferring individuals has placed the health and safety of its detainees at imminent risk.

COVID-19 TESTING AND REPORTING OF SYMPTOMS

Pine Prairie has been routinely using solitary confinement dorms to house either COVID-19 positive or suspected cases (or both). Using punitive tools to isolate people with COVID-19, particularly when combined with a lack of education about the importance of reporting symptoms, severely disincentivizes symptom reporting. As one immigrant explained, “People are terrified to report their COVID-19 symptoms, especially those who do not speak English well, because they know they will end up in solitary.” He has witnessed multiple people with COVID-19 symptoms self-isolating in their cells instead of reporting their symptoms and requesting a COVID-19 test. Another immigrant said, “People have told me even when they have all of the COVID symptoms, including no [sense of] smell, not being able to taste anything, pain in their body, there is a fear of being sent to solitary and so that’s why nobody says anything. We are living injustices I cannot even name.”

After being subjected to solitary confinement for 15 days the first time he contracted COVID-19, one man said that when he felt sick again in January 2021, he avoided reporting his symptoms for “as long as possible.” Eventually, he was in so much pain and had such difficulty breathing that he requested a test. After testing positive, he was placed in solitary confinement for another 15 days, where he was isolated from medical care and amenities including the law library, access to recreational materials, and outdoor time.

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1 According to the ICE Pandemic Response Requirements, “a cohort is a group of persons with a similar condition grouped or housed together for observation over a period of time. Isolation and quarantine are public health practices used to protect the public from exposure to individuals who have or may have a contagious disease. Cohorting, quarantining, and holding in medical isolation is not punitive in nature and must be operationally distinct from administrative or disciplinary segregation, insofar as cells and units for those forms of segregation may be used, but detainees are provided access to TV, reading materials, recreation and telephones to the fullest extent possible.”
AT PINE PRAIRIE, SOLITARY CONFINEMENT IS USED AS MEDICAL CARE, MENTAL HEALTH CARE, PUNISHMENT, AND “PROTECTION”

Solitary confinement is a “form of segregation in which individuals are held in total or near-total isolation.” Immigrants in solitary confinement are held in small individual cells for 22 to 24 hours a day. They are isolated from the same treatment as the general population, including access to recreation, visitation, and other amenities essential to physical and psychological well-being. Any contact with other people is brief and superficial, such as being escorted to the showers by a guard or having meals delivered.

BLACK IMMIGRANTS ARE SIX TIMES MORE LIKELY TO BE SENT TO SOLITARY CONFINEMENT THAN OTHERS IN ICE DETENTION.

Data indicate that as of May 2018, ICE had locked immigrants in solitary confinement at least 11,000 times since September 2013, when its detention centers were required to start reporting such data. Louisiana, which has the world’s highest rates of incarceration and solitary confinement, has been labeled the “solitary confinement capital of the world.”

The same systemic racism endemic to our policing and criminal legal system is inherent to our immigration system. ICE disproportionately locks up Black immigrants in solitary confinement. According to the most recent data, while African and Caribbean immigrants made up 4 percent of people in ICE detention, they represented 24 percent of all people subjected to solitary confinement. Black immigrants are six times more likely to be sent to solitary confinement than others in ICE detention and are significantly more likely to be targeted for deportation. Although only 7 percent of noncitizens in the U.S. are Black, they make up 20 percent of those facing deportation on criminal grounds. Because of policies like the 287(g) program, which deputizes local law enforcement agencies to transfer immigrants to ICE custody, overpolicing translates to more Black immigrants in ICE detention.

Under international human rights law, the Nelson Mandela Rules identify solitary confinement beyond 15 days as a form of cruel, inhumane, and degrading treatment that may rise to the level of torture. Thus, when solitary confinement is used as a punitive measure to segregate and target particular individuals due to their identity, their challenge of authority, or other reasons, in violation of the domestic minimum standards, that State-sponsored conduct may rise to the level of torture. An overwhelming body of evidence now shows that prolonged use of solitary confinement produces profound and often permanent psychological, neurological, and physical damage to segregated individuals.

In the context of immigration detention, immigrants who have been subjected to solitary confinement are likely to suffer from severe anxiety, depression, and post-traumatic stress. One immigrant described the mental health effects of being held in solitary confinement at Pine Prairie: “How do I explain this? It’s been so long. ... I have been here for over two years ... it is irreparable harm to be here for so long without [having committed] a crime.”

Based on interviews with currently detained individuals and others previously subjected to solitary confinement at Pine Prairie, those placed in both disciplinary and administrative segregation units face severely punitive conditions such as little to no recreational or social time; no baseline amenities, such as recreational reading materials; limited access to hygiene; limited access to potable water; limited access to computer tablets or grievance forms; limited access to the law library; and limited legal call access. At Pine Prairie, disciplinary segregation is not only deployed under serious or exceptional circumstances; it is an overtly harsh tool used to maintain day-to-day order and contain public health crises that require comprehensive medical and mental health services. The facility regularly segregates people with particular vulnerabilities as a way to “manage” the detention center population. The following are specific examples of the ways in which Pine Prairie has improperly used solitary confinement as a response to various scenarios, including the outbreak of infectious diseases, mental health crises, and to suppress the exercise of free speech and protest rights.

2 According to ICE, “Disciplinary segregation is a punitive form of separation from the general population for disciplinary reasons. Disciplinary segregation is authorized only pursuant to the order of a facility disciplinary panel, following a hearing in which the detainee is determined to have committed serious misconduct in violation of a facility rule, and only consistent with the Disciplinary Severity Scale from the applicable ICE detention standards, and only when alternative dispositions would inadequately regulate detainee behavior.”

3 According to ICE, “Administrative segregation is a non-punitive form of separation from the general population for administrative reasons. Administrative segregation is authorized only as necessary to ensure the safety of the detainee, facility staff, and other detainees; the protection of property; or the security or good order of the facility, and therefore should be for the briefest term and under the least restrictive conditions practicable, consistent with the rationale for placement. Generally, detainees in administrative segregation shall receive the same privileges as detainees housed in the general population, consistent with safety and security concerns.”
REASONS IMMIGRANTS AT PINE PRAIRIE HAVE BEEN THROWN IN SOLITARY

CONTRACTING OR EXHIBITING SYMPTOMS OF COVID-19

Under ICE’s mandated pandemic response requirements, “a cohort, quarantine, and medical isolation must be operationally distinct from administrative or disciplinary segregation, or any punitive form of housing.” However, solitary confinement has been repeatedly used at Pine Prairie to quarantine immigrants who test positive for COVID-19 instead of providing them with the comprehensive medical care and treatment they need to protect their health and well-being.

For example, one man with severe asthma reported that he contracted COVID-19 twice, in August 2020 and January 2021. In August 2020, he experienced extreme difficulty breathing, constant headaches, high fever, and loss of smell and taste. After receiving oxygen in the medical infirmary for 17 days, this individual was transferred to solitary confinement. He noted that the cell was “virtually identical” to the cells used for disciplinary segregation. Even though he was still exhibiting COVID-19 symptoms, including chills, chest pain, burning eyes, fatigue, and headaches, he was held in solitary confinement for 15 days without access to ibuprofen or other medication. He recalled that every day, a Pine Prairie officer would walk past his cell at around 2 a.m., but no one checked him for a fever or breathing problems. He believes that if he had fainted from lack of oxygen, no one would have discovered that he was in medical distress until he was “dead the next day.”

Placing people in the isolated and deprived conditions inherent to solitary confinement exacerbates both the spread and intensity of COVID-19 in several ways. The fear of being placed in solitary has been shown to discourage detained individuals from reporting exposure to or symptoms of illness, endangering all individuals and staff at the facility. As mentioned above, multiple immigrants at Pine Prairie described a widespread fear of reporting among fellow detainees. In addition, studies indicate that time in solitary confinement can weaken the immune system and exacerbate underlying physical conditions, such as hypertension, that increase the risk of contracting and suffering severe health effects from COVID-19.

Solitary confinement also presents a significant danger to people who have contracted and/or are recovering from COVID-19. Individuals at Pine Prairie reported that the cells they were held in after contracting COVID-19 were “cramped” and “unsanitary.” Several immigrants reported that the solitary cells at Pine Prairie lack any means for sick residents to call for help. Medical and mental health checks are often conducted through the “food slots” in the solid metal doors, making confidential consultations all but impossible. One immigrant said that when someone in solitary had a mental health crisis and attempted to castrate himself, “no one found him until he [had been] bleeding out for two hours.”
HAVING A PANIC ATTACK IN THE RECREATIONAL YARD

At Pine Prairie, solitary confinement is typically the default for detained immigrants who seek mental health counseling. Under ICE’s standards, there must be a review process for all detainees placed in segregation for over 14 days who have been identified as vulnerable due to, for example, mental health concerns. A key aspect of this review mandates that if an individual’s medical or mental illness worsens, or there is a suicide risk, appropriate health care must be provided. If it is determined that segregation caused the deterioration of a detained individual’s medical or mental health, an alternative to segregation must be provided. In June 2019, the Department of Homeland Security (DHS) Office for Civil Rights and Civil Liberties concluded that ICE detention centers routinely keep an “alarming” number of detainees with mental health conditions in segregation, and that many were isolated for “shockingly” long periods.

After being held in solitary confinement for 27 days, one person said he now suffers from extreme stress, anxiety, and depression. He has spoken to the facility’s psychologist three times, but he has not been offered any medication or a tangible treatment plan. “The psychological services haven’t helped me at all,” he said. “The only thing they offer is ‘time to talk,’ but talking does not help my anxiety and depression.” He reported that his anxiety and depression were triggered by being detained at Pine Prairie, noting that “I have never in my life felt like this before.”

Under ICE requirements, Pine Prairie must provide detained immigrants subject to segregation with daily face-to-face mental health assessments and must notify ICE when an individual is in segregation for over 30 days. One individual reported that mental health personnel usually “walked by” solitary confinement cells at 6 a.m., when most detainees are asleep. He described that these mental health checks, which are required by ICE’s standards, are not helpful or sufficient because the mental health personnel avoid actually engaging with detained individuals and “just want to get their rounds over with.” Another immigrant also described Pine Prairie’s available psychological services as “insufficient and dismissive.”

CONTRACTING MUMPS DUE TO OVERCROWDING AND UNSANITARY DETENTION CONDITIONS

In addition to individuals “suffering from mental illness,” under ICE’s standards those suffering from “serious medical illness” are also subject to administrative segregation due to their “special vulnerability.” Yet Pine Prairie has routinely relied on solitary confinement to isolate individuals who have contracted infectious diseases. Last year, Pine Prairie mishandled and failed to take adequate measures to protect detained individuals from outbreaks of chicken pox and mumps. In February 2019, 500 immigrants at Pine Prairie were quarantined after 18 people tested positive for mumps (a viral infection that affects the salivary glands). In March 2019, about 300 migrants were quarantined for at least 25 days due to another mumps outbreak at the facility.
One individual reported that in February 2019, he contracted mumps during an outbreak of the disease at Pine Prairie. As a result, he was placed in solitary confinement for 27 days, despite the fact that mumps is only contagious for nine days after swelling begins. The man said he was in “incredible pain” because of the mumps infection and could not open his mouth to talk or eat. While he was in solitary, a nurse came by once a day to give him medication. After the first three days, he reported that he did not have human contact, despite his vulnerable mental state, for 24 days.

**PARTICIPATING IN A PEACEFUL HUNGER STRIKE**

Pine Prairie misuses solitary confinement as retaliation to punish immigrants who exercise their fundamental rights, including the right to protest and free speech, to speak out against the conditions of their confinement.⁴

On **August 3, 2019**, officers at Pine Prairie shot tear gas canisters and rubber bullets at approximately 115 hunger strikers who were protesting in the facility’s recreation yard. Some hunger strikers and protesters were also beaten. At least one protester required CPR resuscitation after being shot with tear gas. After the attack, individuals reported that ICE locked some of the hunger strikers in solitary confinement and punifically denied them communication with their legal counsel, friends, and families. A Cuban asylum seeker participated in a peaceful protest in August 2019, to address the blanket denial of parole requests. “They [Pine Prairie personnel] gave me 30 days of punishment … without going out for four days [and] without bathing like pigs, with pepper spray on our bodies,” he said. “They took us out in the sun only once a week. I lost 10 pounds. I thought I would hurt myself because of so much confinement … I did not sleep at night. The guards made noise. They brought our meals randomly so we couldn’t keep track of time. I was taking medicine until the day I left because of that trauma from the bullets and the screaming of the people because of the gases in our throats. And to this day I feel depressed at times for just coming to this country.”

In **August 2020**, a group of 45 Black asylum seekers participated in another peaceful hunger strike as a continuation of a demonstration that had begun in March. The hunger strikers were protesting the conditions of their confinement, their indefinite detention, their racist treatment, blanket parole denials, and Pine Prairie’s response to the COVID-19 pandemic, among other injustices. In response, Pine Prairie officers told the protesters that if they continued their hunger strike, they would be placed in solitary confinement. The protesters sat on the floor and raised their arms to show that they were unarmed. Fifteen guards retaliated with tear gas canisters, a tear gas gun, pepper spray, and handcuffs. One immigrant described watching an ICE officer break a fellow protester’s arm as he wrestled him to the ground—he vividly remembers hearing the “snap” of the bone. ICE officers in full riot gear then rounded up all 45 hunger strikers and took them to the solitary confinement unit, “Echo,” where they faced punitive conditions including little to no recreational time; no access to computer tablets; no access to TV or recreational reading materials; limited access to showers and hygiene materials; limited access to potable water; no access to the law library; and limited legal call access. The punitive nature of this segregation directly violates ICE’s own standards.

**ONE IMMIGRANT DESCRIBED WATCHING AN ICE OFFICER BREAK A FELLOW PROTESTER’S ARM AS HE WRESTLED HIM TO THE GROUND—HE VIVIDLY REMEMBERS HEARING THE “SNAP” OF THE BONE.**

One asylum seeker from Ghana described his participation in the peaceful hunger strikes in June 2020, after which he was placed in retaliatory solitary confinement for 10 days. He noted that the protests he participated in were a response to the observation that all African asylum seekers at Pine Prairie were assigned to one immigration judge, who only granted asylum to one out of over 50 applicants. This individual was also denied asylum, and he reported that he believes his status as an African asylum seeker barred him from obtaining legal relief. While in solitary, he said, he did not have access to phones, tablets, or the law library. The guards repeatedly threatened him, stating, “If you don’t eat, you will be here [in the Echo solitary confinement unit] forever.” He noted that he could hear the screams and cries of other protesters from their cells. One protester, an immigrant from Uganda, was having such severe anxiety due to prolonged solitary that medical personnel determined he was showing physiological signs of having suffered from a stroke.

**REASONS PEOPLE HAVE BEEN THROWN IN SOLITARY AT PINE PRAIRIE**

- Exhibiting symptoms of and/or contracting COVID-19.
- Being exposed to someone who contracted COVID-19.
- Asking Pine Prairie personnel for hand sanitizer.
- Complaining about the inability to follow COVID-19 social distancing requirements.
- Translating and communicating the complaints of other detained immigrants.
- Fighting with a fellow detained immigrant over use of a shared television.
- Contracting mumps from unsanitary and overcrowded detention conditions.
- Having an anxiety attack in the recreational yard.
- Breaking a window while in prolonged solitary confinement.
- Participating in a peaceful hunger strike to protest systemic racism at Pine Prairie.
- Participating in a peaceful protest against blanket parole denials at Pine Prairie.

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⁴ As reported in an August 29, 2019, letter from a coalition of concerned organizations, September 26, 2019, calls for federal investigations by the DHS OIG and Congress, and the several news reports, these unchecked responses by ICE are common throughout the NOLA ICE jurisdiction. DHS never investigated the similar incidents detailed in these prior complaints, and the Southern Poverty Law Center never received any record in response to its FOIA request (reference number Department of Homeland Security FOIA 2020-HQFO-00014) relating to the brutal use of force at Pine Prairie in August 2019.
SUMMARY OF RECOMMENDATIONS

- We urge the DHS Office of Civil Rights and Civil Liberties (CRCL) and the Office of Inspector General (OIG) to recommend that ICE immediately terminate the Intergovernmental Services Agreement (IGSA) with the GEO Group and all contracts related to Pine Prairie ICE Processing Center and facilitate the safe release of all those detained, as ICE and its contractors, including the GEO Group, have continuously showed an ongoing history of abusive conditions, and are unfit to house human beings in this facility.

- We request that OIG establish a complaint mechanism immediately end the inhumane and unlawful use of punitive and human rights laws—would vastly improve the quality of life for people currently detained at the facility.

- We request that OIG investigate the conditions documented in this complaint, issue recommendations specifically regarding the agency’s failure to provide adequate medical care and mental health services, and hold Pine Prairie accountable for the improper use of solitary confinement and use of force.

- We request that OIG initiate a review of ICE’s grant of parole and bond in ICE’s New Orleans Field Office (“NOLA ICE”).

- We request that CRCL conduct a prompt investigation of civil rights and civil liberties complaints related to Pine Prairie ICE Processing Center and all immigration detention facilities under the jurisdiction of the NOLA ICE.

- We request that CRCL establish a complaint mechanism and disseminate information to facilitate the submission of complaints by detained immigrants.

While we do not believe that any amount of reform at Pine Prairie can justify its continued incarceration of immigrants, we believe that immediately implementing the following protections—ones that immigrants are entitled to under civil and human rights laws—would vastly improve the quality of life for people currently detained at the facility.

- Immediately end the inhumane and unlawful use of punitive solitary confinement at Pine Prairie and all other facilities under the jurisdiction of NOLA ICE.

- Place vulnerable individuals in non-surveillance-based alternatives to detention (ATD) programs if they cannot be placed safely with the general population, and expand the release of individuals on humanitarian parole or immigration bond.

- Place individuals who have contracted COVID-19 and those who are at risk of exposure and/or symptomatic in medical isolation units instead of solitary confinement. These medical isolation units must include:
  - Adequate ventilation and appropriate temperature.
  - Access to potable water and safe, adequate food.
  - Oversight by medical staff, not security staff.
  - Unlimited access to recreational materials including TV, tablets, reading materials, and free phone calls.
  - Access to commissary and other personal property.
  - Daily access to medical and mental health care.
  - A daily minimum of two hours of outdoor recreational time.

- Daily updates for segregated individuals that explain why medical isolation is necessary and the expected timeline of continued segregation.

- Full transparency with individuals, their families, and legal counsel regarding conditions and reasons for an individual’s placement in medical isolation and immediate removal from medical isolation once medical staff have cleared an individual’s risk of transmission.

- Train staff about the legal requirements and negative mental health effects of solitary confinement, emphasizing that segregation should only be used as a last resort and for the shortest amount of time possible.

- Ensure that every person detained is provided with an individualized assessment, under a presumption of release, prioritizing those most medically vulnerable to complications from COVID-19, as is mandated by Fraihat.5

- Ensure that every person detained and all Pine Prairie staff and personnel have access to the COVID-19 vaccine, including linguistically and culturally appropriate education on the benefits and importance of receiving the vaccine, particularly for those who are medically vulnerable to COVID-19 complications.

- Ensure that Pine Prairie and other detention facilities under the jurisdiction of NOLA ICE comply with ICE detention standards, which require that individuals in segregation are provided the same rights as those in the general population, such as outdoor recreation, access to legal counsel and the law library, visitation, adequate food, potable water, recreational reading materials, and hygiene.

- Ensure that Pine Prairie and other detention facilities under the jurisdiction of NOLA ICE properly implement sufficient daily face-to-face mental health assessments for individuals in segregation with mental health professionals who are independent from and report to an authority other than the detention facility or DHS.

- Ensure that immigrants detained in Pine Prairie and other detention facilities under the jurisdiction of NOLA ICE are provided the opportunity to challenge their placement in segregation before an independent review body.

- Maintain and publicly distribute accurate records on the use of segregation. Require facilities to notify ICE any time a detainee is placed in administrative or disciplinary segregation and to provide ICE, the detained individuals, and the detained individual’s legal counsel with detailed reasoning behind the placement in segregation.
AS YET ANOTHER VECTOR OF MASS INCARCERATION, WE MUST END INHUMANE IMMIGRATION DETENTION.

We oppose a system that criminalizes, detains, and punishes vulnerable populations—people who should be released to their families and communities whenever possible. Every human being is entitled to access to safe drinking water, nutritious food, responsive health care, and freedom from abuse, including from arbitrary and punitive solitary confinement, among other basic dignities. Individuals who are navigating their immigration cases should be able to do so alongside their loved ones in their communities, not behind bars in ICE’s jails.

Pine Prairie’s treatment of migrants is nowhere near unique—these kinds of abuses occur daily in ICE’s 200-plus detention facilities nationwide. Over the past two years, similar abuses and conditions have been reported at other detention centers within the NOLA ICE jurisdiction specifically, including LaSalle (Jena), Winn, Bossier, South Louisiana, Allen Parish, Catahoula, LaSalle (Olla), Jackson Parish, Richwood, River, and Tallahatchie. Therefore, ending the detention of migrants at Pine Prairie is not enough. We must close all ICE facilities within the NOLA ICE jurisdiction and end the practice of immigrant detention in its entirety.

“PRISONS DO NOT DISAPPEAR SOCIAL PROBLEMS, THEY DISAPPEAR HUMAN BEINGS.”

-ANGELA Y. DAVIS